## STATEMENT OF

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FORM 1		ORGANIZATION			FEC MAIL CENTER		
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M	5	
ALASKA D	EMO	CRATIC LEA	DERS	HIP FEDER	AL ÇO	MMITT	EE
	<u> </u>	<del></del>					
ADDRESS (number a	nd street)	P. O. BOX 1	6194				
(Check if address is changed)		PLANTATION			FL 33318		
			CITY		STATE	ZIP	CODE
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)  DemocraticLeadershipCommittees@gmail.com  (Check if address is changed)							
COMMITTEE'S WEB	PAGE ADD	RESS (URL)					
(Check if is change							
2. DATE 10	)" / <b>17</b>	°′ <b>20</b> 12					
3. FEC IDENTIFIC	CATION NU	MBER C					
4. IS THIS STATE	MENT 🔀	NEW (N) OR		AMENDED (A)	- <u>.</u>		
I certify that I have	examined th	is Statement and to the bo			is true, correc	et and complete	<i>9</i> .
Type or Print Name	of Treasurer	ALEXANDE	R CL	IN I ON			
Signature of Treasure	er <u>‡</u>	Hexander	di	utos	Date 10	)" ′ 17°	′ <b>2012</b>
NOTE: Submission of	•	ous, or inco <del>mple</del> te informati ANY CHANGE IN INFORM	•			•	of 2 U.S.C. §437g.
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